

U.S. Department of Justice  
United States Marshals Service

## PROCESS RECEIPT AND RETURN

PLAINTIFF <b>UNITED STATES OF AMERICA</b>	COURT CASE NUMBER CR No. 04-40027-FDS
DEFENDANT <b>ROBERT A. FAFARD</b>	TYPE OF PROCESS <b>Preliminary Order of Forfeiture</b>
<b>SERVE AT</b>	NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN <b>Alan J. Black, Esquire</b>
	ADDRESS (Street or RFD, Apartment No., City, State, and ZIP Code) <b>1383 Main Street Springfield, MA 01103</b>

SEND NOTICE OF SERVICE TO REQUESTER AT NAME AND ADDRESS BELOW:

Kristina E. Barclay, Assistant U.S. Attorney  
United States Attorney's Office  
John Joseph Moakley United States Courthouse  
1 Courthouse Way, Suite 9200  
Boston, MA 02210

Number of process to be served  
with this Form - 285Number of parties to be served  
in this case

Check for service on U.S.A.

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Address, All Telephone Numbers, and Estimated Times Available For Service)

Please serve the attached Preliminary Order of Forfeiture upon the above-referenced individual by certified mail, return receipt requested. JMD x3296

Signature of Attorney or other Originator requesting service on behalf of:

☒ PLAINTIFF  
☐ DEFENDANT

TELEPHONE NUMBER

(617) 748-3100

DATE

July 8, 2008

## SPACE BELOW FOR USE OF U.S. MARSHAL ONLY - DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total  
number of process indicated.  
(Sign only first USM 285 if more than  
one USM 285 is submitted)Total Process  
No. \_\_\_\_\_District of Origin  
No. **38**District to Serve  
No. **38**

Signature of Authorized USMS Deputy or Clerk

Date

**7/15/08**I hereby certify and return that I ☐ have personally served, ☐ have legal evidence of service, ☐ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc. at the address shown above or on the individual, company, corporation, etc., shown at the address inserted below.☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc., named above (See remarks below).

Name and title of individual served (If not shown above).

☐ A person of suitable age and discretion then residing  
in the defendant's usual place of abode.

Address (complete only if different than shown above)

Date of Service

**7/23/08**

Time

am

pm

Signature of U.S. Marshal or Deputy

Service Fee

Total Mileage Charges  
(including endeavors)

Forwarding Fee

Total Charges

Advance Deposits

Amount Owed to US Marshal or

Amount or Refund

REMARKS:

**7/18/08 certified mail - 7008 0150 0003 597x 0339**  
**7/21/08 Date of Delivery**

PRIOR EDITIONS MAY  
BE USED

1. CLERK OF THE COURT

FORM USM 285 (Rev. 12/15/80)

☐ USMS RECORD ☐ NOTICE OF SERVICE ☐ BILLING STATEMENT ☐ ACKNOWLEDGMENT OF RECEIPT
**(3)**